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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

				I II QII AII A	- COLLIE				Office Us	e Only	
1.	NAME OF COMMITTEE (in full)			IAILING LABE OR PRINT 🗑	EL E	xample:If typ ver the lines	ing, type				
Ш	MADISON PAC; THE		1 1	1 1 1 1				1 1 1 1			
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	Check if different than previously reported. (ACC)	SP	RING	FIELD				L MA	0-	1103	
2.	FEC IDENTIFICATION	NUMBER	~		CITY 🛋			STATE	4	ZIPCODE	<b>A</b>
	C00426809			3	. IS THIS REPOR		NEW (N) O	R	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b	) Mor Rep		Feb 20 (M	2)	May 20 (f	M5)	Aug 20 (M8)		lov 20 (M11) Non-Election ear Only)
	(a) Quarterly Reports:		Duc		Mar 20 (M	3)	Jun 20 (N	<b>Л</b> 6)	Sep 20 (M9)	L C	ec 20 (M12) Non-Election ear Only)
	April 15				Apr 20 (M	4)	Jul 20 (M	17)	Oct 20 (M10)	J	an 31 (YE)
	X Quarterly Rep July 15 Quarterly Rep October 15		(c)	12-Day  PRE-Election  Report for the		Primary (1		H	neral (12G) ecial (12G)	R	lunoff (12R)
	Quarterly Rep January 31 Quarterly Rep	` ′		El	ection on					in the State of	
	July 31 Mid-Y-Report(Non-el Year Only) (M	lection Y)	(d)	30-Day  Post -Election Report for the		General (	30G)	Ru	noff (30R)	s	pecial (30S)
	Termination R (TER)	leport			ection on				•	in the State of	
5.	Covering Period	0 1	0 1	2008		throug	h 0	3 3 1	2008		
	ertify that I have examined be or Print Name of Treas			the best of my n J. Ahern	y knowledg	e and belief i	t is true, cor	rect and com	plete.		
Sig	nature of Treasurer El	ectronically	Filed b	oy Mr. Brian	J. Ahern			Date	0 4 1 4	2	0 0 8
NO	TE : Submission of false,	erroneous,	or inco	omplete inform	ation may	subject the p	erson signin	g this Repor	to the penalties	of 2 U.S.C	3437g.
	Office Use Only									<b>FORM</b> v. 12/2004)	

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name MADISON PAC; THE <sup>®</sup> D " D 0 1 0 1 2008 0.3 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 78160.75 2008 January 1 (b) Cash on Hand at 78160.75 Begining of Reporting Period ..... 15850.00 15850.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 94010.75 94010.75 6(a) and 6(c) for Column B) ..... 5400.00 5400.00 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 88610.75 88610.75 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name MADISON PAC; THE

Report Covering the Period:

M M O 1

From:

01

<sup>Y</sup> 2008

To: 0 3 3 4

<sup>D</sup> 3 1

<sup>Y</sup> 2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(i) Itemized (use Schedule A)		0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	15000.00	15000.00
	(such as PACs)(d) Total Contributions (add Lines	1000.00	10000.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15000.00	15000.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
4.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	850.00	850.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15850.00	15850.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	15850.00	15850.00

23.

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 5400.00 5400.00 Expenditures..... (c) Total Operating Expenditures 5400.00 5400.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to Federal Candidates/Committees.....and Other Political Committees..... 0.00 0.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) ......... 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 5400.00 5400.00 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

5400.00

5400.00

from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	15000.00	15000.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	15000.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5400.00	5400.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	850.00	850.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	4550.00	4550.00

FE6AN026

## SCHEDULE A (FEC Form 3X)

City State Zip Code PARK RIDGE IL 60068  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify) ▼  Parimary General Other (specify) ▼  Pill Name (Last, First, Middle Initial) FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) ▼  State Zip Code Washington DC 20004  FEC ID number of contributing federal political committee.  Name of Employer  Cc. C00024869  Primary General Other (specify) ▼  State Zip Code DC 20004  Amount of Each Receipt this  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Transaction ID: SA11C.42  Amount of Each Receipt this  Transaction ID: SA11C.42  Amount of Each Receipt this  Soundary Political Committee  Transaction ID: SA11C.42  Amount of Each Receipt this  Transaction ID: SA11C.42  Amount of Each Receipt this  Transaction ID: SA11C.42  Amount of Each Receipt this  Transaction ID: SA11C.42  Amount of Each Receipt His	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 9 (check only one)  11a 11b X 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial)  AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE  Mailing Address 520 N, NORTHWEST HIGHWAY  City State Zip Code PARK RIDGE FEC ID number of contributing federal political committee.  Name of Employer  C C C00255752  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) FEC ID number of contributing federal political committee.  Name of Employer  C C C0024869  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42  Amount of Each Receipt this	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE  Mailing Address 1299 Pennsylvania Ave NW Suite 900W  City State Zip Code Washington DC 20004  FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE  Mailing Address 51 Madison Ave. Room 117M  City New York NY 10010  FEC ID number of contributing federal political committee.  C C00024869  Date of Receipt  Transaction ID: SA11C.42:  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42:  Amount of Each Receipt this  Date of Receipt  Transaction ID: SA11C.42:  Amount of Each Receipt  Transaction ID: SA11C.42:  Amount of Each Receipt this  Transaction ID: SA11C.42:  Transaction ID: SA11C.42:  Transaction ID: SA11C.42:  Amount of Each Receipt this	Full Name (Last, First, Middle Initial)  AMERICAN SOCIETY OF ANESTHESIOLOGIST  Mailing Address 520 N. NORTHWEST I  City  PARK RIDGE  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:	State Zip Code IL 60068  C C00255752  Occupation  Aggregate Year-to-Date	M M / D D / Y Y Y
Name of Employer    Cocupation	Full Name (Last, First, Middle Initial) GENERAL ELECTRIC COMPANY POLITICAL AG Mailing Address 1299 Pennsylvania Ave Suite 900W City Washington FEC ID number of contributing	CTION COMMITTEE  NW  State Zip Code DC 20004	M M / D D / Y Y Y Y
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE  Mailing Address 51 Madison Ave. Room 117M  City State Zip Code New York NY 10010  FEC ID number of contributing federal political committee.  Name of Employer  C C00158881  Date of Receipt  M M / D D / Y 1/2  Amount of Each Receipt this  C C00158881	Name of Employer  Receipt For: Primary General	Occupation  Aggregate Year-to-Date ▼	
Other (specify) ▼	NEW YORK LIFE INSURANCE COMPANY POLI Mailing Address 51 Madison Ave. Room 117M  City New York  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General	State Zip Code NY 10010  C C00158881  Occupation	M M / D D / Y Y Y Y
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/9 (check only one)  11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MADISON PAC; THE			
Full Name (Last, First, Middle Initial) Boston Symphony Orchestra Mailing Address 301 Massachusetts Av	venue		Date of Receipt
City	State	Zip Code	0 3 0 3 2 0 0 8  Transaction ID: SA15.4222
Boston	MA	02115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		850.00
Name of Employer	Occupation	n	refund of overpayment
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 850.00	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	850.00
TOTAL This Period (last page this line number only)	<b>•</b>	850.00

CHEDULE B (FEC Form 3X)	Use separate schedule(s)			E NUMBE		PAGE 8/9					
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Full Name (Last, First, Middle Initial) Cranwell Hotel							ion ID:	SB21	B.422	27.0	
Mailing Address 55 Lee Road					0 <sup>M</sup> 1	М	/ D	0 /	Y	6 o ŏ 8	3 Y
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SCHEDULE B (F	· 1	Use separate schedule(s)				R LIN			R:	PAGE 9/9							
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